



'Learning Collective Initiative' in Covid-19 Vaccine Delivery Partnership (CoVDP)

Tuesday, May 31 - 1:30 –3:00 PM CEST





Session 1 Topic : Best practices focused on identification of target population, priority-use groups and strategies to vaccinate i.e. older adults, health workers, adults with comorbidities

- Tuesday, May 31 - 1:30 –3:00 PM CEST



Housekeeping

Please scan this QR code or follow the link in the chat to complete our icebreaker activity.

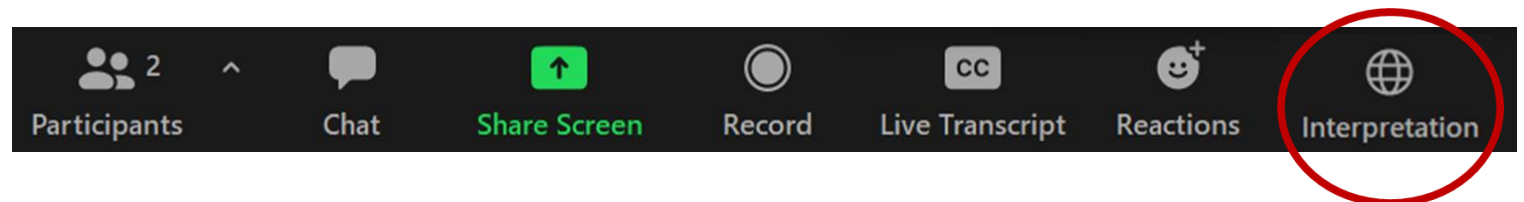
Veillez scanner ce code QR ou suivre le lien dans le chat pour terminer notre activité brise-glace.



Interpretation

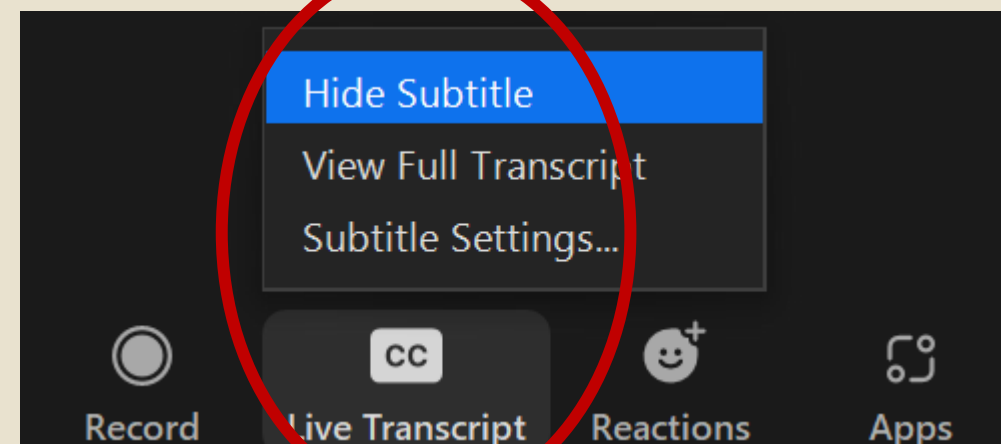
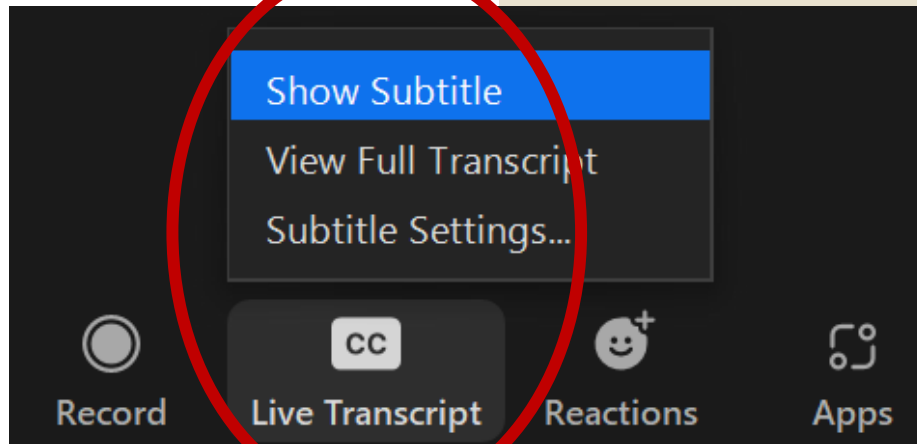
Interpretation in French and English is available by clicking the **Interpretation** button

Click on “Interpretation” and choose the language that you would like to hear. To hear the interpreted language only, click “Mute Original Audio”



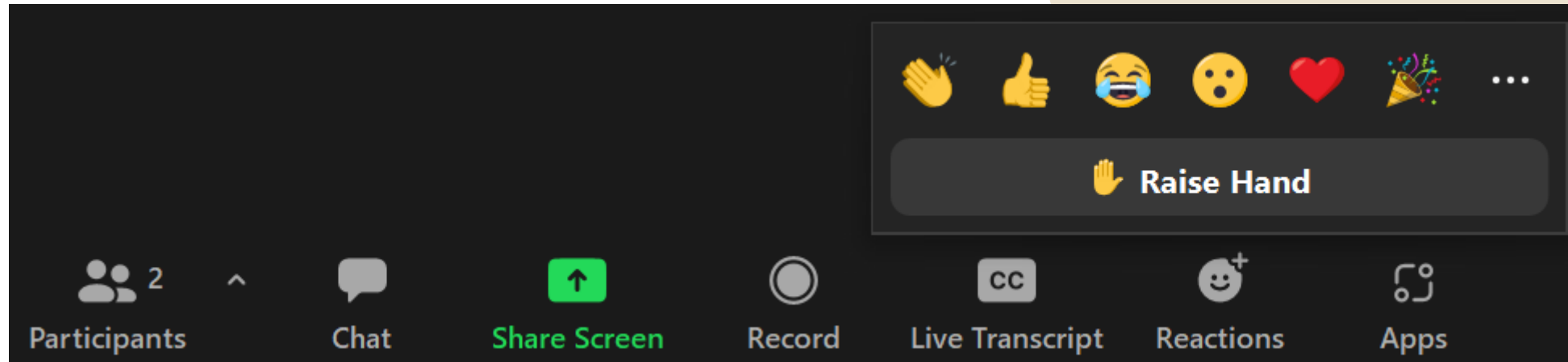
Live Transcription (ENG)

Click on “Live Transcript” and choose “Show Subtitle” and caption would appear on screen. To close the caption, click “Hide Subtitle”



Q&A

Use the Chat or Reactions > Raise Hand features for questions throughout the call



Recordings and Certificate

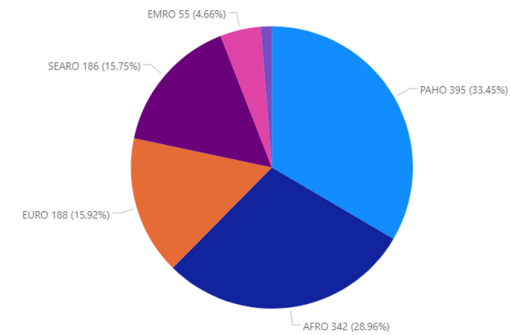
This session is being recorded and your attendance is consent to be recorded

The Recordings, PowerPoint, and all resources will be shared after the call

A Certificate of Attendance will be available through the University of New Mexico via link in the Chat at the end of the session

Data Use

Project ECHO® collects registration, participation, questions/answers, chat comments, and poll responses for some ECHO programs. Your Personally Identifiable Data will be shared with the project funder. This data may be used for reports, maps, communications, surveys, quality assurance, evaluation, research, and to inform new initiatives.





Global overview and Objectives of the Learning Collective Initiative

Ann Lindstrand, Deputy CoVDP



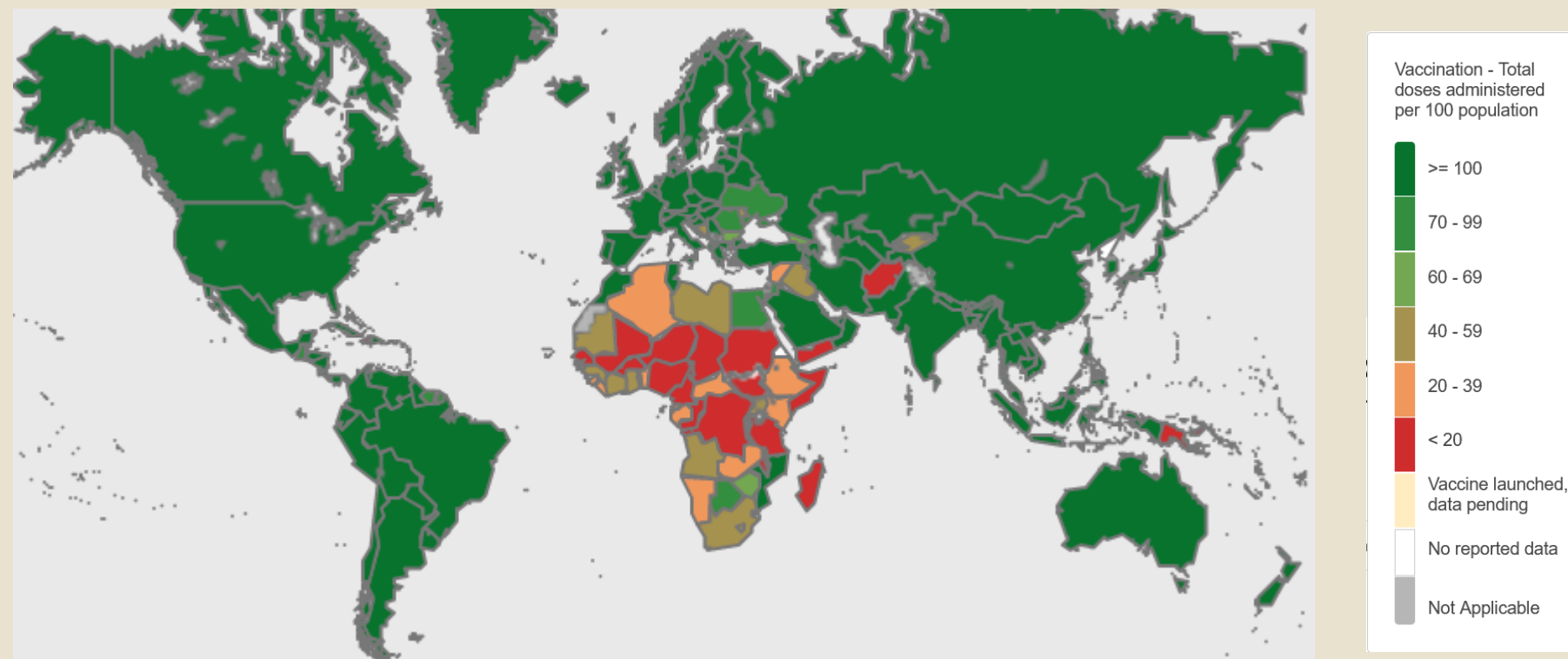
Almost 12 billion doses administered globally, but inequities persist

11.8 billion vaccine doses administered globally as of May 24th, 2022

4 billion vaccine doses administered across AMC participants

Strong global vaccine inequity persists – 18 AMC participants have vaccinated less than 10% of the population (compared to 34 in January 2022)

Persons fully vaccinated per 100 population



Note: The designations employed, and the presentation of these materials do not imply the expression of any opinion whatsoever on the part of WHO concerning the legal status of any country, territory or area or of its authorities, or concerning the delimitation of its frontiers or boundaries. Dotted and dashed lines on maps represent approximate border lines for which there may not yet be full agreement.

There are in total 92 Covax Advanced Market Commitment (AMC) in low and lower middle income countries with special condition to access Covax vaccine doses.

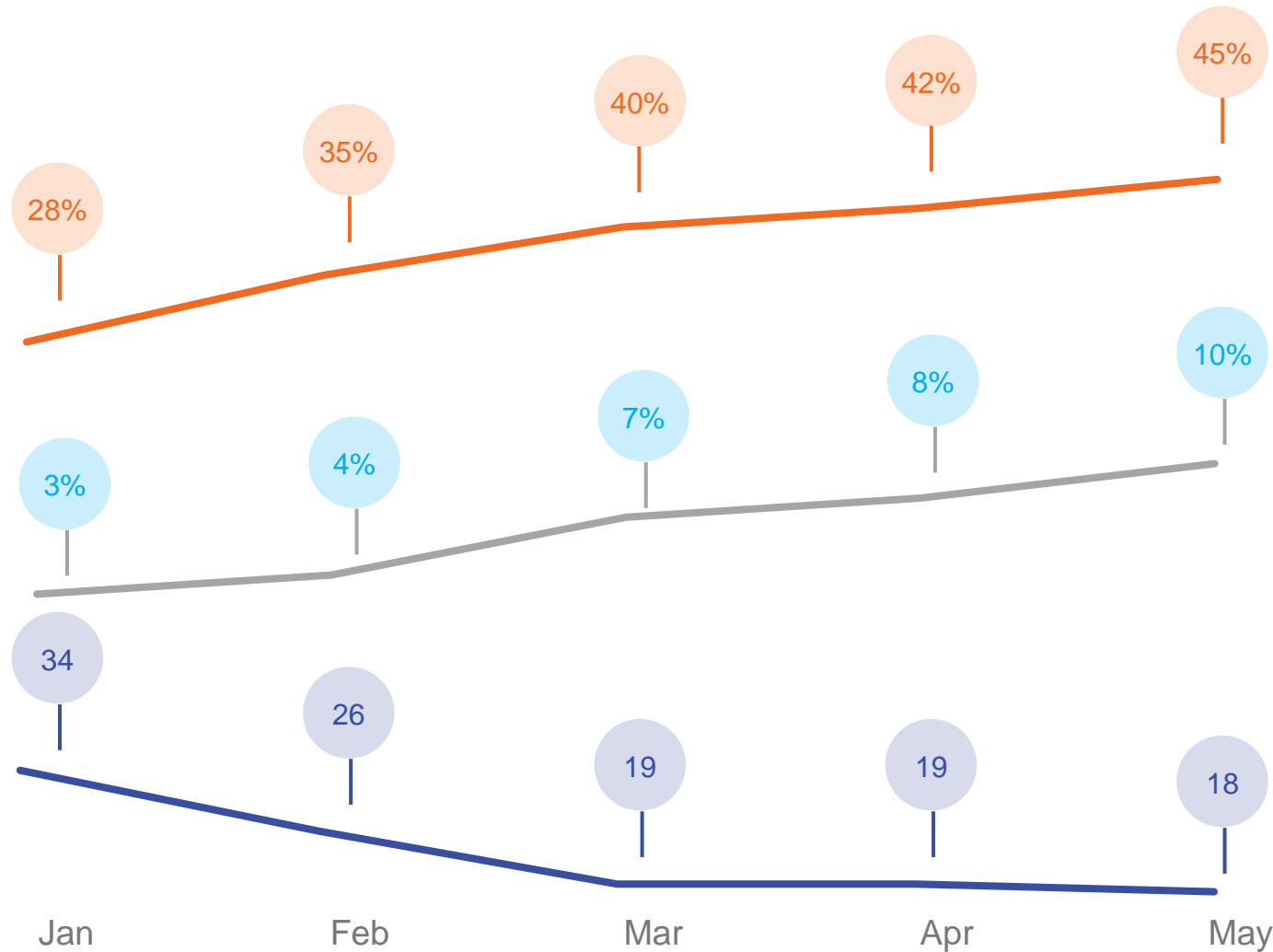
Source: WHO COVID-19 Dashboard (map), UNICEF Procurement Portal (COVAX shipments), Bloomberg (total # of doses administered),

Progress since Jan 2022 | AMC countries have made significant progress

Share of population with completed primary series in AMC92

Share of population with completed COVID-19 primary series in 34 countries for concerted support

Number of countries with less than 10% coverage



1.6x coverage increase across all AMC92

3.3x coverage increase across 34 countries with lowest coverage rates

16 countries have crossed 10% coverage line

A 'Learning Collective Initiative' established under the CoVDP to provide targeted support to 34 concerted support countries.

Objectives:

- To **collect, consolidate and share lessons learned, best practices and challenges** with COVID-19 vaccination to provide targeted support to 34 concerted support countries.
- To cultivate a community of learning for COVID-19 vaccine roll-out and **directly connect countries with one another** to maximize on peer-learning.
- **Audience;**
 - Primarily directed at national authorities who (i.e., senior practitioners like state ministers, DGs, Coordinators of national COVID-19 Task Forces and program EPI managers, incident managers).
 - Secondary target audience includes partners in the One Country Team who can provide desired technical support.



Learning Collective in
Covid-19 vaccine Delivery partnership (CoVDP)



- A 6-session series in partnership with Project ECHO
 - **first session will be 31st May 2022, 1:30 – 3:00 PM CEST.**
 - Subsequent sessions will be third Tuesday of every month, 1:30 – 3:00 PM CEST
 - June 21, 2022,
 - July 19 2022,
 - August 16 , 2022,
 - Sept. 20 2022,
 - Oct. 18 2022,
- Each 90-minute session will focus on a thematic area and include a brief didactic presentation and two country presentations on their COVID-19 vaccination learnings and challenges.
- Details on the topic and the presenters will be sent 1 week prior to each session.
- We encourage you to register for the whole series,

We welcome participants to share country experiences in the learning collective fora

Presentation outline

Topic: Best practices and strategies for identifying and vaccinating priority groups ,e.g. older adults, health workers, adults with comorbidities,

- ❖ Welcome and Objectives
- ❖ House keeping and Opening poll
- ❖ Brief overview of the ECHO Model
- ❖ Global view on strategies for vaccinating priority groups
Shalini Desai, WHO HQ
- ❖ Best practices on COVID -19 vaccination and strategies for identifying and vaccinating priority groups – **Sierra Leone - Dr Lynda Farmagrant, MOH**
- ❖ Best practices on COVID -19 vaccination and strategies for identifying and vaccinating priority groups –**Burkina Faso - Mr Zongo Amidou, MOH**
- ❖ Wrap up and closing



Icebreaker Activity/Opening poll

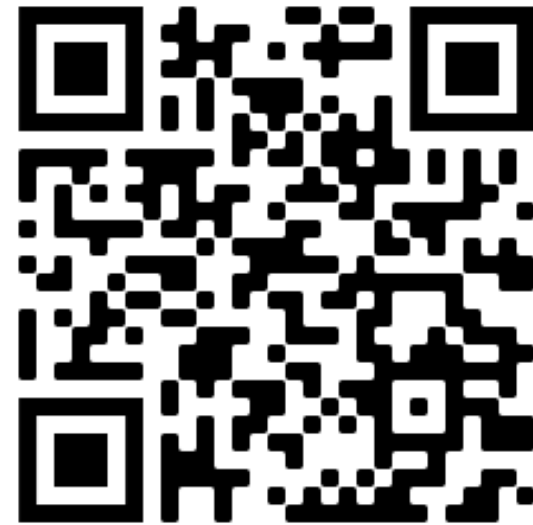
Santosh Gurung, CoVDP



Icebreaker Activity

Please scan this QR code or follow the link in the chat to complete our icebreaker activity.

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Which organization are you mainly working for?

Government Ministry of Health

Government Other

WHO/UNICEF CO

WHO/UNICEF RO or HQ

GAVI

Multilateral Donor

Non-governmental organization

Independent Consultant

Other

What country are you joining from?

Official Map 2011 Data after 11 July 2011



World Health Organization

The boundaries and names shown and the designations used on this map do not imply the expression of any opinion whatsoever on the part of the World Health Organization concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries. Dotted and dashed lines on maps represent approximate border lines for which there may not yet be full agreement. © WHO 2012. All rights reserved.

Data Source: World Health Organization
Map Production: WHO Graphics

On your day-to-day job as related to COVID-19 vaccination response, which areas has your COVID-19 focus country(ies) encountered the most significant challenges in the past calendar month (select all that apply):

Regulatory preparedness

Planning, coordination and service delivery

Costing and funding

Supply chain and wastage management

Human resources and training

Demand generation

Vaccine safety

Monitoring and evaluation

COVID-19 surveillance



Overview on Covid-19 Vaccine Delivery Partnership (CoVDP)

Ted Chaiban, Global Lead Coordinator for COVID-19 Vaccine Delivery





The ECHO Model

Amy V Groom, ECHO Institute



The ECHO Model [Extension for Community Healthcare Outcomes]

1. Leverage Technology



- Multipoint videoconferencing to co-create platforms for enhanced communication and collaboration through virtual face-to-face communities of practice and learning
 - amplify scarce human resources, both specialists and primary care
 - empower the agency of local experts and practitioners



2. Case-Based Learning

- Master complexity through collaborative management of patients and public health problems with subject matter experts at centers of excellence
- guided practice [learning by doing] via tele-mentoring



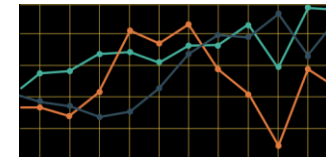
3. Sharing Best Practices



- Improve outcomes by reducing variation in processes of care
- Brief didactic presentations [10-20 min]
- Reinforcement of evidence-based guidelines, etc

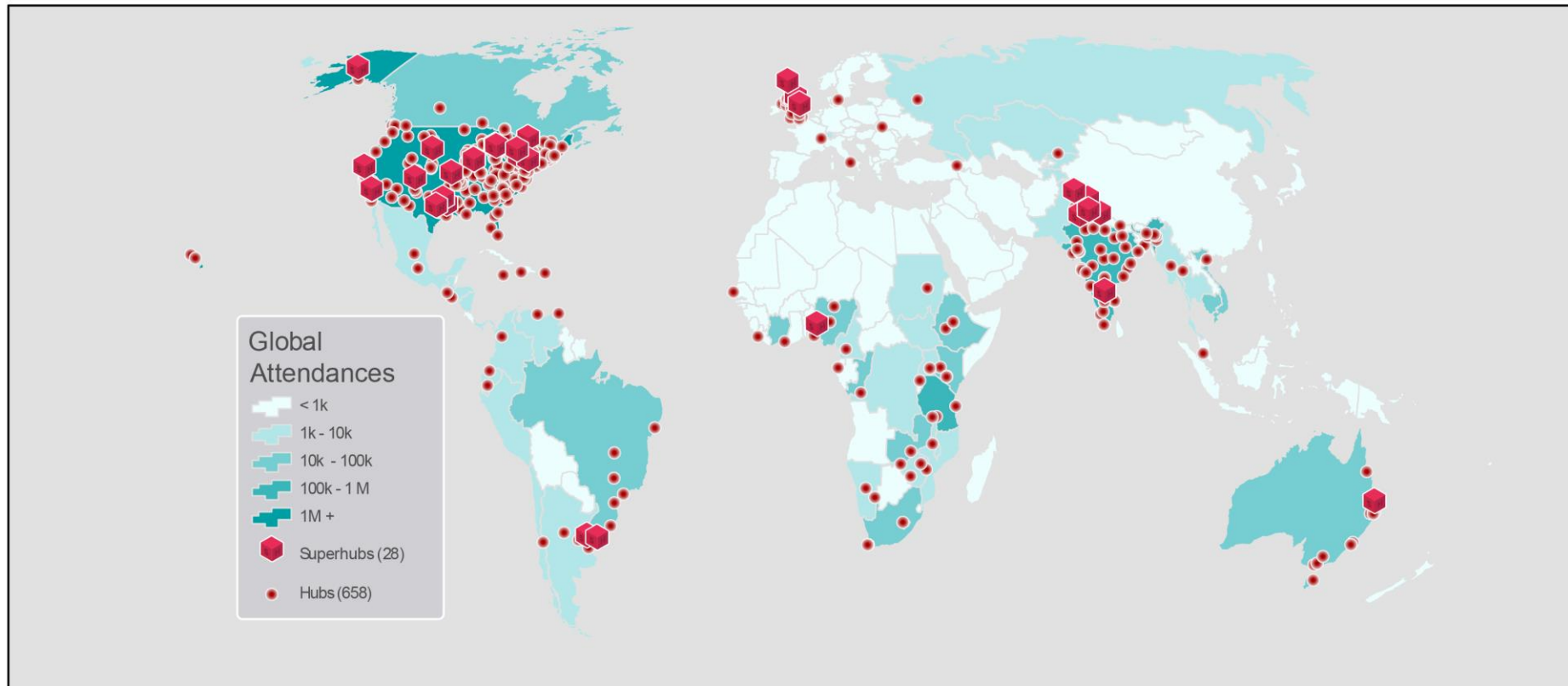
4. Monitor and Evaluate Outcomes

- to promote continuous quality improvement



ECHO Global Network 2022

- ECHO has been adopted by over 600 of the world's leading health organizations who are running over 2,000 ECHO networks in over 55 countries.
- During COVID-19 these ECHO partners collectively delivered knowledge to over 3.3M health workers in 190 countries.





Global view on strategies to vaccinate priority -use groups

Shalini Desai, WHO HQ



Background

Goal of COVID-19 vaccination programme is to optimize impact against severe disease, hospitalization, & death, & to protect health systems

Objective how other countries' have designed their COVID-19 vaccination strategies to reach their priority risk groups

Use older persons as an example

Outline:

1. Background
 2. Considerations for strategies to reach older person
 3. Vaccine uptake
-

COVID-19 cases and deaths with age and sex reported

[Back to menu](#)

Country, area or territory

All ▼

[Link to detailed dashboard](#)

Time period for which cases/deaths are summarized

12/30/2019

5/16/2022



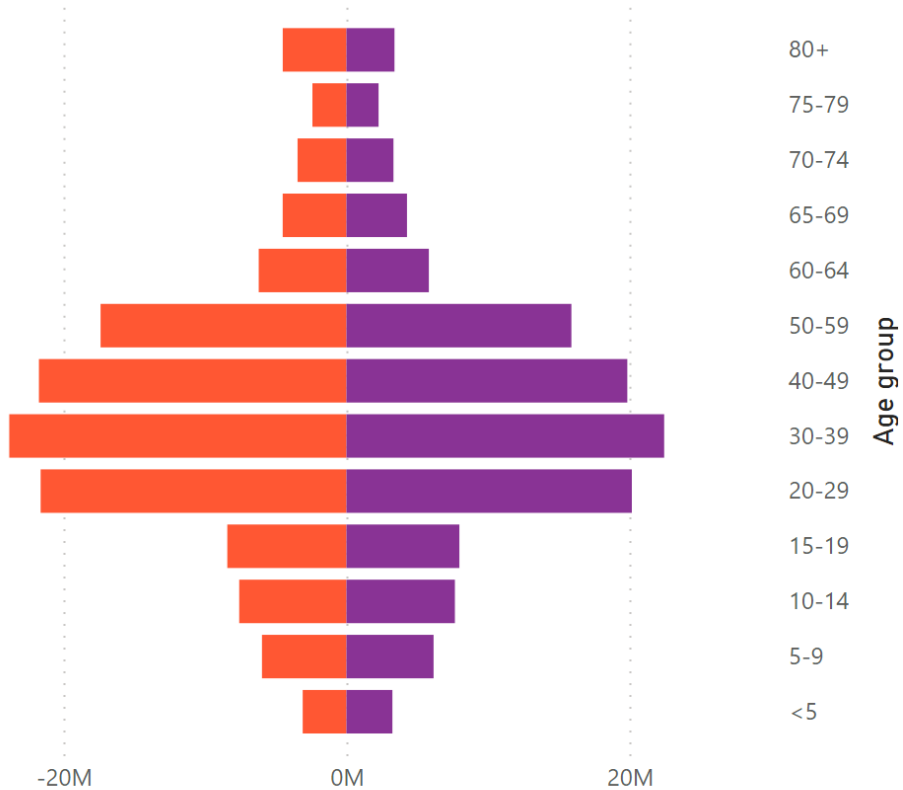
WHO region

- Select all
- AFR
- AMR
- EMR
- EUR
- SEAR
- WPR

Cases (confirmed and probable)

Number of cases
253209655

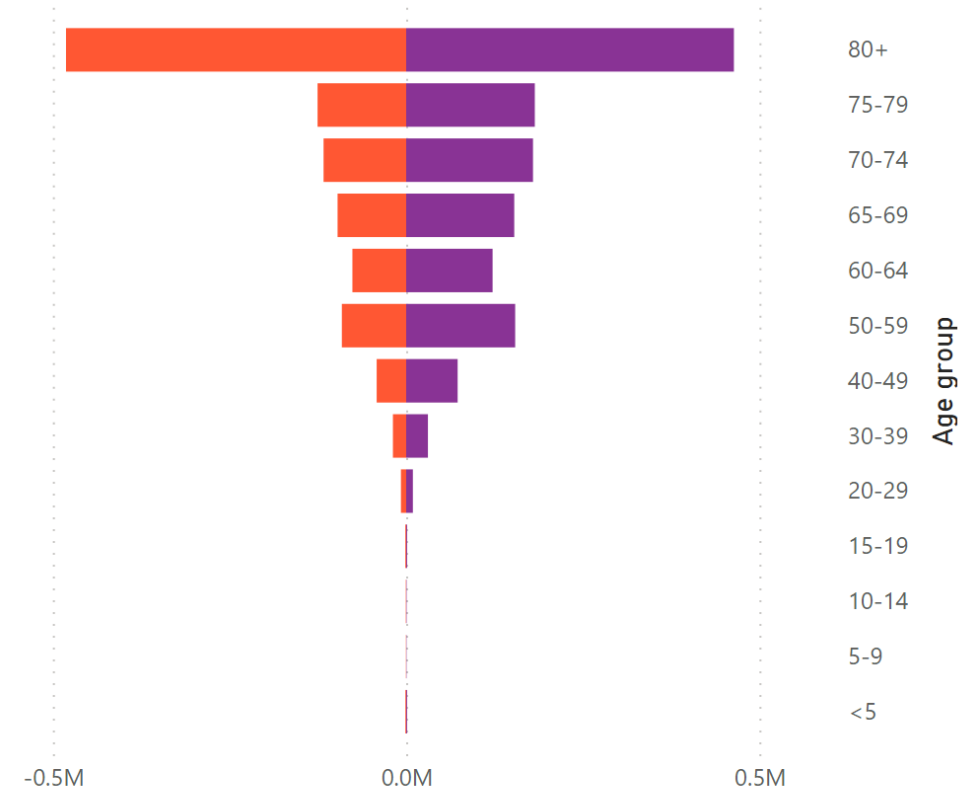
● Female ● Male



Deaths (confirmed and probable)

Number of deaths
2430497

● Female ● Male



Number of countries, areas or territories
183

Overview of COVID-19 vaccination and COVAX status update as of May 23, 2022

DATA AS OF MAY 23



Key numbers on COVID-19 vaccination

- 12.3** Billion doses of COVID-19 vaccine have been administered globally
- 64** Million doses are administered on a daily basis (47 million more doses vs. last week)
- 60 %** People that completed the primary vaccination. Only 13% in LICs
- 69 %** People vaccinated with at least one dose. Only 16% in LICs

Out of 194 WHO Member States

- 58** have vaccinated more than 70% of their population (Colombia since last week)
- 126** have vaccinated more than 40% of their population (no update since last week)
- 174** have vaccinated more than 10% of their population (no update last week)
- 161** have started COVID-19 vaccine booster/additional dose programmes

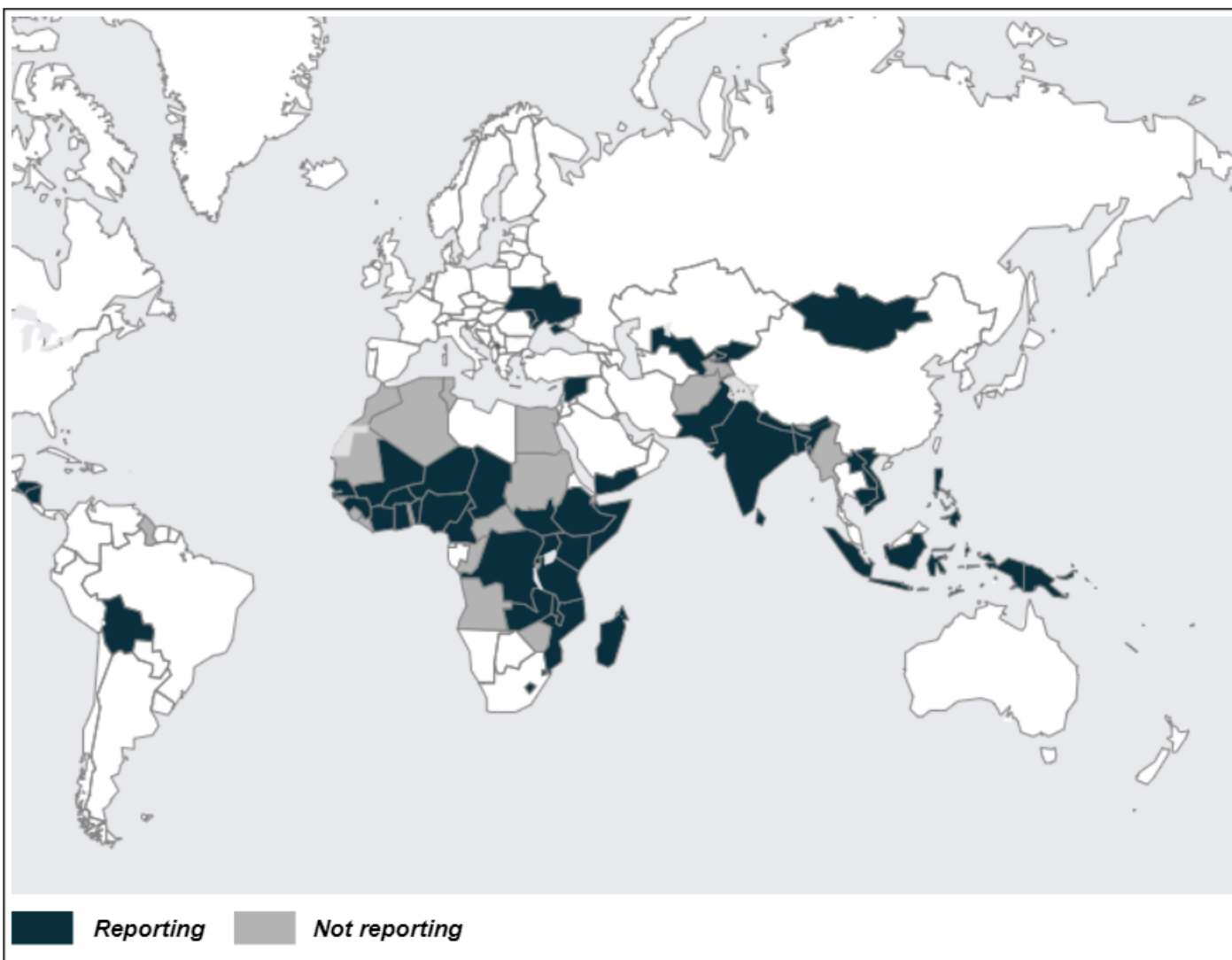


Key COVAX numbers

- 1.5** Billion COVAX doses delivered since the start of the programme
- 24** Million COVAX doses delivered since the start of the month
- 11** Countries will receive new COVAX doses by end of week (May 23- May 29)

-  Lesotho
-  Nepal
-  Nigeria
-  Ethiopia
-  Liberia
-  Côte d'Ivoire
-  Guatemala
-  Somalia
-  Tajikistan
-  Djibouti
-  Mauritania

Older adult vaccination coverage in reporting AMC participants



Aggregate view across AMC participants

- 62 Number of AMC participants reporting on older adult vaccination coverage
- 298M Number of country-defined older adults in reporting AMC participants
- 89 % Percent of older adults in reporting AMC participants of total older adults in all AMC
- 64 % Percent of older adults with a complete primary series across reporting AMC participants

Breakdown view by WHO region

Region	Count of part.	% of tot. AMC old. ad. in rep. AMCs	% of old. ad. w/ c.p.s.* across rep. AMCs
AFR	39	83 %	30 %
AMR	10	76 %	65 %
EMR	11	50 %	84 %
EUR	6	96 %	31 %
SEAR	9	97 %	75 %
WPR	15	100 %	37 %
Total	90	89 %	64 %

* Complete primary series | Sources: eJRF and other monthly regional reporting systems

Principles:

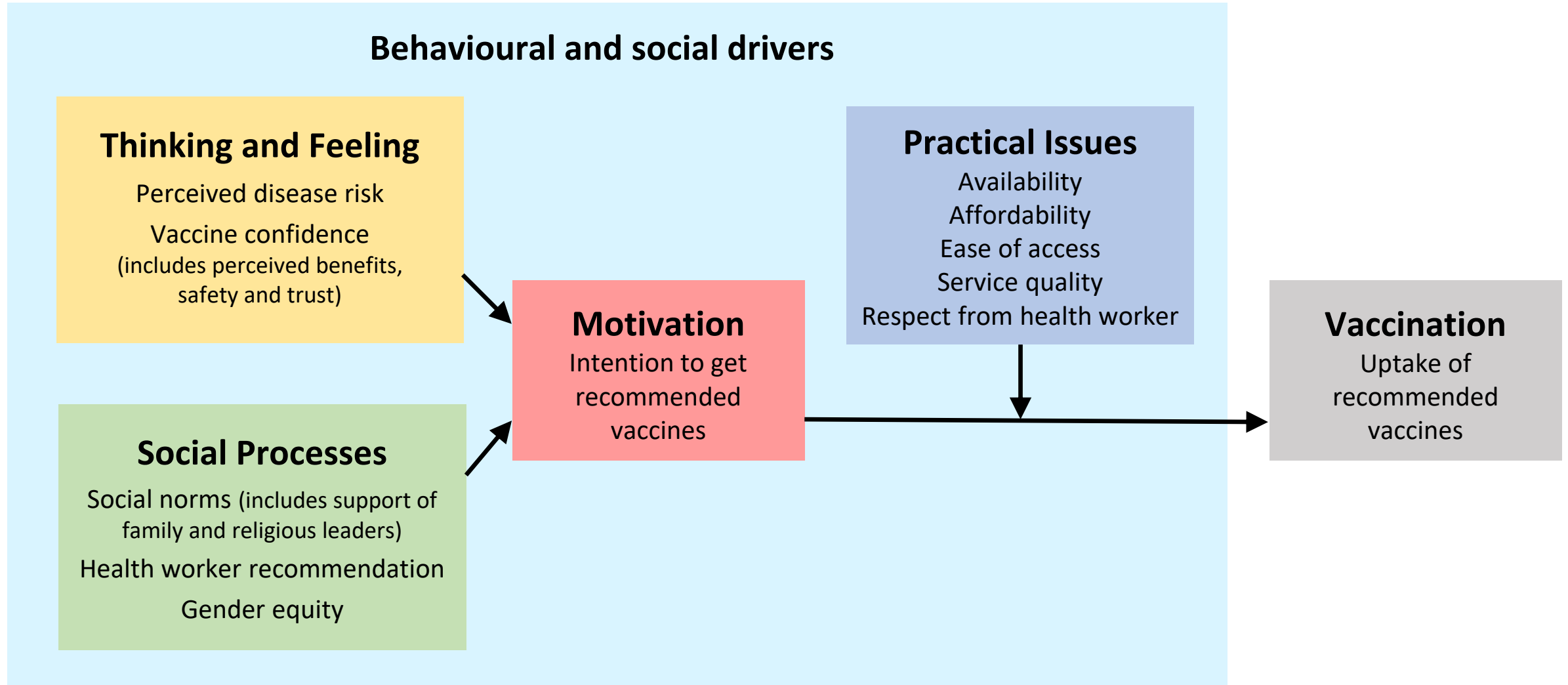
Context specific

- **Country and context specific:** considering feasibility, compatibility, acceptability to users and caregivers and health and care workers, equity, and accountability.
- **Meet them where they are** – minimize barriers and ensure the accessible transportation and safe place for those with loss of mobility, visual impairment, hearing loss.
- **Person-centred approach:** focus on individual centred provision of health services.
- **COVID-19 legacy:** To maximize **the use of Covid-19 investments and Covid-19 vaccine roll-out experiences** to strengthen immunization programmes and primary health care systems beyond the pandemic response should be the first practical step towards achieving this integration.

Considerations for different strategies:

Consideration	Fixed Sites	Residential homes	Community based outreach sites	Mobile clinics	Mass campaigns
Examples	Hospital or other health facility	Long term care facilities, resident care homes, nursing homes etc	Markets, Places of worship	House to house	Central location
Access	Known location	Older adults may already be here Does not reach community dwelling older people	Require older persons to travel to site	Could be set up closer to where older persons live Or in case of home to home easier access point	Require travel to site
Community mobilization	May need more intensive mobilization for older adults to attend	Mobilization may be easier	Same outreach locations as for other vaccinations may make mobilization easier	Mobilization may be easier	Needs strong mobilization
Vaccine supply	Continuous vaccine supply available with other routine vaccines	Uptake may require caregiver consent	Challenging to know exact number of older people who will attend outreach session	Challenging to know exact number of older people who will attend mobile clinic or who will accept vaccine (house to house)	Large volume of vaccine needed over short duration Distribution challenges (must be able to redistribute/ re-supply quickly during campaign)
Cold chain	Cold chain available at health centre	Vaccine carriers must be prepared to maintain cold chain	Vaccine carriers must be prepared to maintain cold chain	Vaccine carriers must be prepared to maintain cold chain	Vaccine carriers must be prepared to maintain cold chain
Integration opportunities	Help to strengthen older persons Health Services	Integrate with other visits	Co-delivery with short-duration interventions possible		Integrate with other campaigns (e.g. influenza vaccine)
Cost	Low as supported by national health budget	Medium-High (depends if using existing residential home staff is possible)	Medium-High (depends if using existing outreach sessions that are already planned and funded)	Generally high (but for small populations may be more cost-effective) Additional budget for per-diems and transport, etc.	Generally high (but for small populations may be more cost-effective) Additional budget for per-diems and transport, etc.

What drives vaccine uptake?



The tree of interventions to increase uptake



Summary

- High risk groups such as older persons **may need targeted strategies**
 - Which strategy will depend on the **local context**
 - Vaccine uptake can be enhanced by improving **accessibility** to COVID-19 vaccines
 - This series will provide an **opportunity for countries to share** strategies that facilitated uptake of COVID-19 vaccines
 - **Other high priority groups** can also benefit from tailored approaches
 - WHO will be publishing further guidance specific to vaccinating older persons
-



World Health
Organization



Thank you



Best practices on COVID -19 vaccination and strategies for identifying and vaccinating priority groups

Dr Lynda Farmagrant, MOH - Sierra Leone





GOVERNMENT OF SIERRA LEONE
Ministry of Health and Sanitation

**Learning Collective in
COVID-19 vaccine Delivery Partnership (CoVDP)
Sierra Leone**

May 31, 2022



Child Health/ EPI Program

Outline

- Country profile
- COVID-19 vaccination performance
- Strategies to scale up COVID-19 vaccination
- Challenges and issues impairing attainment of targeted coverage
- Best practices in scaling up COVID-19 vaccination
- Identification of target population
- Identification and reaching out risk groups

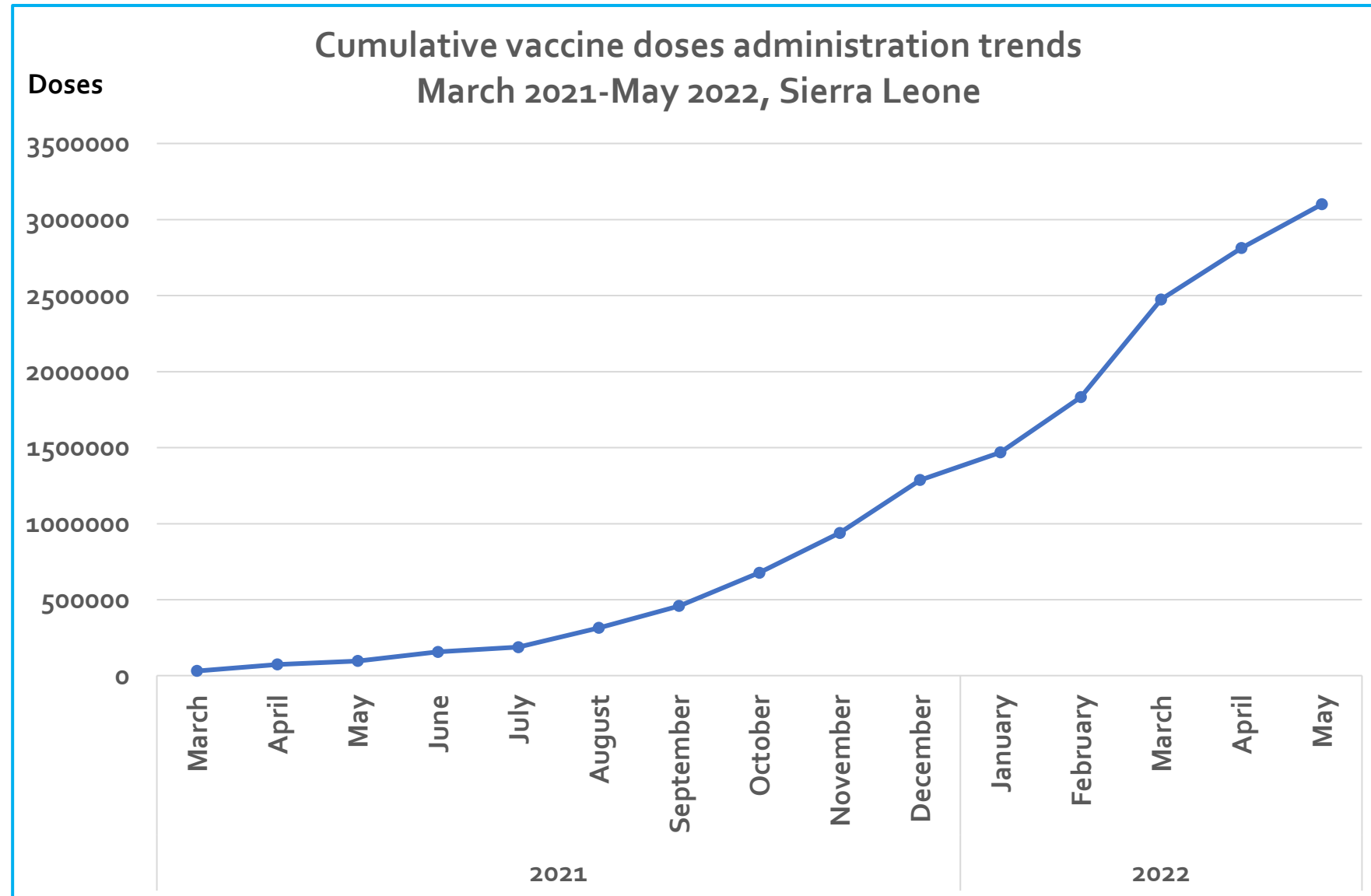
Sierra Leone country profile



- Location: Western Coast of West Africa
- Area: **71,740** sq KM
- Administrative: 5 provinces and 16 districts
- Total Population: **8,488,831** people
- Target population for COVID-19 vaccination-**5,602,628** (above 12 years)
- COVID-19 vaccination was launched on March 15, 2021

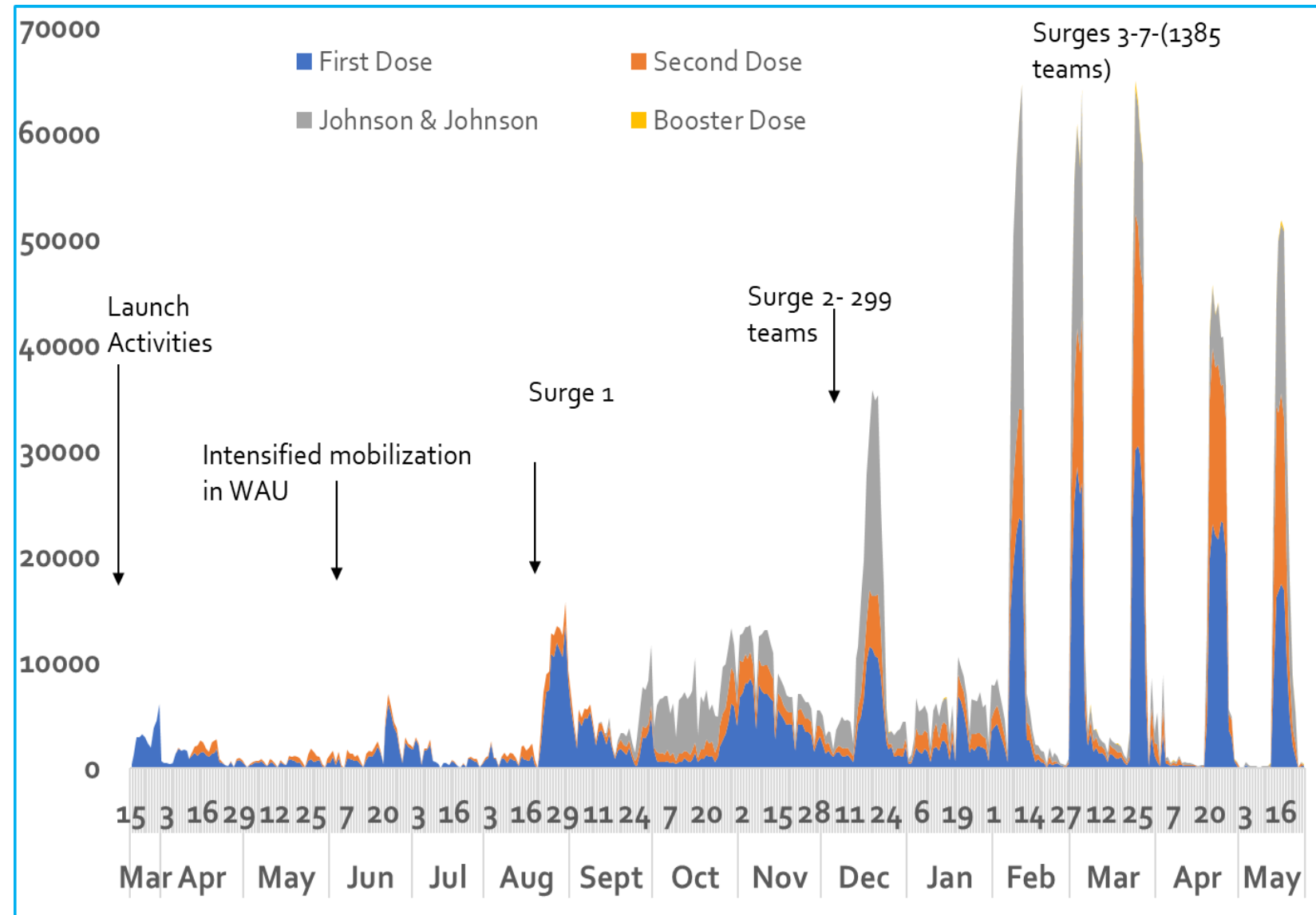
COVID-19 vaccination updates (1 of 2)

- As of May 25, country have received **4,425,540** doses of COVID-19 vaccine
- Country utilized **3,132,132 (70.8%)** doses of COVID-19 vaccine against total doses received.
- Vaccine on pipeline)
 - ✓ J&J **1,140,000** (ETA June)



COVID-19 vaccination updates (2 of 2)

- As of May 25, **2,392,628** Individuals have received at least one dose giving coverage of ;-
 - ✓ **42.7%** of target population >12 years
 - ✓ **28.2% of total population**
- 1,664,743** people are now fully vaccinated
 - ✓ **29.7%** of target population
 - ✓ **19.6% of total population**
- Children aged 12-17 Vaccinated **167,584**
- Booster doses provided **8,703**
- 69.6%** ($1,664,743/2,392,628$) of all individuals with at least one dose are fully vaccinated
- Surge campaigns remain the main strategy to increase vaccination coverage



Phased Approach;-

Phase 1&2 – Targeted HCWs and population aged ≥ 60 years

- health care workers reached using a fixed strategy at their respective health facility
- >60 yrs and Comorbidity used combination of fixed and mobile strategy
- **72** teams – 4 teams per district (2 static, 2 mobile)

Phase 3 - Phase 1&2 + Population ≥ 18

- Used Combined fixed and Mobile strategy
- Team expanded to **299**

Strategies to scale up COVID-19 vaccination

Phase 4- General population: ≥ 12 years and booster dose

- Fixed , mobile and outreach strategy
- Periodic Surge campaign strategy
- Teams expanded to **1,385** teams up to Chiefdoms and PHUs
 - ✓ Static vaccination sites at PHUs: **724**
 - ✓ Outreach vaccination sites: **589**
 - ✓ Mobile vaccination sites : **72**

Leadership and coordination

- Regular COVID-19 vaccination TWG meetings at the national level
- Periodic review of the National COVID-19 Deployment Plan
- Establishment of strategic documents (guidelines) for vaccination
- Involvement of Health Development Partner during planning - preventing duplication of work
- Use of NaCOVERC and DiCOVERC in planning and coordination.

Logistics and supply chain

- Assessment of storage capacity at national and district level
- Increase in storage capacity at National and some District level

Service Delivery

- Use of Chiefdom Supervisors and relevant stakeholders in development of comprehensive micro plan in some districts
- Pre-engagement of partners in the surge planning phase
- Implementation of Surge Strategy
- Conduction of daily debriefing meetings during Surge at DHMTs

Risk communication and Demand Creation

- Community led action (CLA) approach in some districts through the deployment of mobilizers
- Integrated movement planning for both vaccinators and mobilizers
- Social media engagement

Vaccine Regulation/Vaccine Safety and AEFI Surveillance

- Use of the 117 platform in the report process of AEFIs
- Regular NITAG meetings (4 Meetings)

Monitoring and Evaluation

- Real time COVID-19 data entry by vaccination team at PHU levels using android phones
- Establishment of google reporting platform to provide daily district update to the national

Challenges impairing attainment of targeted coverage (1 of 3)

Leadership and Coordination

- Delay in the provision of resources to fund vaccination deployment/ surges.
- Suboptimal coordination between NaCOVERC and MOHS- EPI

Logistics and Supply chain

- Inadequate infrastructure to accommodate cold chain equipment in some district
- Lack of CCE in some PHUs
- Inadequate distribution of vaccines and other logistics from national to district and District to PHUs
- Vaccines received with short shelve life span
- Lack of real time stock reporting tools

Service Delivery

- Inadequate micro plan to map and identify resource needs at District and PHU level
- Limited duration of training vaccinators (one day) and some vaccinators not trained
- Heavy workload of vaccination teams
- No means of transport for hard-to-reach communities e.g., riverine communities
- Inadequate /maldistribution of partner support to district level

Risk communication and Demand Creation

- Inadequate engagement of special groups (elders, youth)
- Insufficient community engagement before Covid-19 vaccination
- Weak Coordination among SM Partners, especially at the district level

Vaccine Regulation/Vaccine Safety and AEFI Surveillance

- Inadequate reporting of adverse events following immunization (AEFIs)
- Inadequate response to AEFI surveillance and management

Monitoring and Evaluation

- High data records not entered in DHIS2
- Inadequate number of trained data entry officers
- Inadequate number of primary data collection tools (vaccination cards, summary forms, and screening forms)
- Electronic data systems not synchronized
- Inadequate internet connectivity and data bundle
- Loss of data due to paper-based data collection and transfer to central systems

Next steps

- Scale up of best practices to other districts
- Periodic use of surge strategy to increase COVID-19 vaccination
- Prioritize DHIS2 data entry – training data clerks, provide tablets and incentivizing.
- Develop policy and guidelines for integrating COVID-19 vaccination into routine health services (routine vaccination)
- Mobilize resources to strengthen routine immunization and COVID-19 vaccination

Acknowledgements



DEUTSCHE ZUSAMMENARBEIT



THANK YOU

THANK YOU



**MINISTRY OF HEALTH
AND SANITATION**
THE REPUBLIC OF SIERRA LEONE



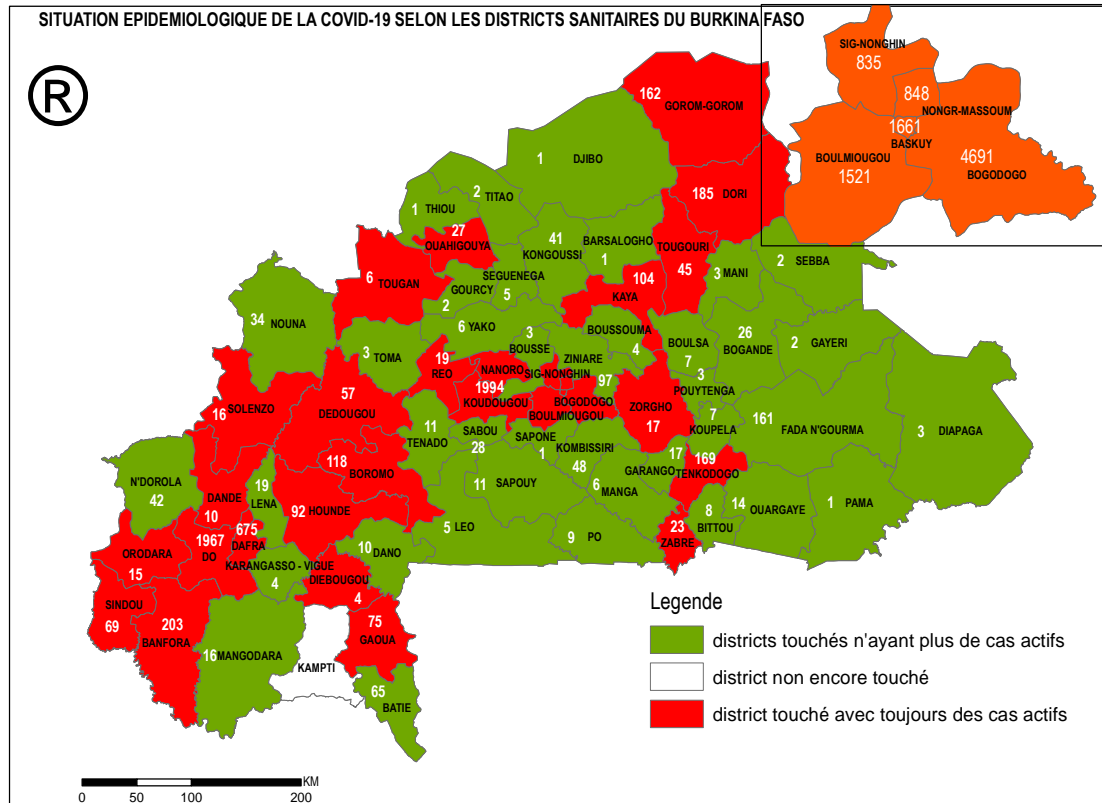
Best practices on COVID -19 vaccination and strategies for identifying and
vaccinating priority groups
Mr Zongo Amidou, MOH - Burkina Faso



INTRODUCTION

- Burkina Faso notified its **first COVID-19** cases on 09 March 2022
- All 13 regions and 70 districts of the country were affected by COVID-19.
- Epidemiological situation as of 22 May 2022:
 - **21,017 confirmed cases** of which **13 286 men** and **7,731 women**.
 - Number of recovered: **20,582**
 - Number of deaths: **386**
 - Case fatality rate: **1.8%**

Country profile



- Development of NDVP 1 in February 2021
- Organisation of IAR of COVID-19 vaccination in in September 2021
- Development of NDVP II in October 2021
- Mobilisation of vaccines through COVAX facility and bilateral collaboration
- 6 types de vaccins have been deployed in all 13 regions of the country: **Astra Zeneca ; Johnson & Johnson, Sinovac, Sinopharm et Pfizer BioNtech**
- Beginning of vaccination on 2 June 2022
- Priority groups comprised of health personnel, people aged 60 years and above, people with comorbidities

STRATEGIES TO SCALE UP COVID-19 VACCINATION



Strategies to scale up COVID-19

✓ Implementation of campaigns to intensify COVID-19 vaccination

Burkina Faso organised so far 3 rounds of COVID-19 vaccination campaigns:

- December 2021,
- January 2022 and
- April 2022

✓ Routine vaccination in all government health facilities



Best Practices in Burkina Faso

Best practices in identification and reaching out to target population and risk groups



- Organisation of intensive vaccination days in all 70 districts with a view to reach priority groups, in hospitals and large private health facilities, prisons, places of worship, IDP sites and institutions
- Extension of the search for priority groups in peripheral health units
- Vaccination at workplace for public servants and private workers who are among priority groups
- Implementation of specific strategies to reach out priority used groups in areas affected by insecurity through the involvement of communities, government armed forces and local partners (NGOs, development associations)
- Use of single-dose vaccine (J&J) in areas affected by insecurity and to reach out to nomadic populations.

MAIN CHALLENGES



Challenges Planning and Coordination



- National organizing Committee not functional at subnational level
- Insufficient coordination among financial partners
- Delay in vaccination data transmission from subnational level
- Inadequate number of vaccination teams during mass campaigns
- Inadequate implementation of routine vaccination
- Delay in paying allowance of vaccinators for the past 2 campaigns

Challenges Supplies and Logistics

- Inadequate UCC capacity for vaccine storage at all levels
- Lack of capacity to monitor vaccine supply at subnational level
- Inadequate capacity to manage vaccine waste
- Inadequate capacity to store vaccines at 2°C to +8°C in many sites



Challenges Demand Generation



- Lack of capacity for management of rumors on COVID-19 vaccines and vaccination
- Lack of communication data on COVID-19 vaccine
- Insufficient broadcasting of TV and radio programs on COVID-19 vaccination
- Lack of community-based communication activities on COVID-19 vaccination
- Lack of population adherence to COVID-19 vaccination

Challenges AEFI Reporting



- Lack of quality control on COVID-19 vaccination
- Under notification of AEFI
- Lack of systematic use of vigiflow platform for AEFI data management
- Lack of technical capacity for investigation of severe AEFI
- Lack of peer review on investigation severe AEFI

Challenges Financing

- Insufficient funding to implement the NDVP
- Delay in disbursement of funds to cover operational cost of campaigns



Plaidoyer des autorités sanitaires auprès des détenteurs d'enjeux



Vaccination des leaders religieux a la mosquée centrale de Ouagadougou par le ministre de la sante



Des fidèles musulmans vaccinés pendant le mois de carême



Vaccination par exemple



Vaccination dans un établissement scolaire



Vaccination dans un marché



30/05/2022



Causerie éducative suivie de vaccination contre la COVID-19



Supervision d'une équipe de vaccination



Supervision de proximité



Réfrigérateur non homologué



Closing poll/ Wrap up and closing
Santosh Gurung, CoVDP



What's Next?

- Recordings from this session will be available in English, French
- Next session:

Date	Topic	Registration Link
Tuesday 21 June 2022	TBD : Best practices on COVID -19 vaccination and strategies with focus on integrated campaigns	Register here

- **A Certificate of Attendance** will be available through the University of New Mexico via link in the Chat at the end of the session (5-minute survey).
 - At the end of this survey, you will be able to print a certificate of attendance or just submit your feedback.
 - We really value your feedback so we can improve these learning sessions, so please take advantage of the Attendance Certificate.
 - English: https://redcap.link/Learning_Collective_Initiative

Webinar materials and Continuing the Conversation



Find all the webinar materials
(recordings, slides...)



On TechNet-21: <https://www.technet-21.org/en/topics/covid-vax-learning-collective>

Webinar materials will be available on this page after each session.



Ask your questions and share your experiences



On Telegram in EN : <https://t.me/+gKtKi-Lvo1VmMTI0>

Please scan this QR to join the Telegram “CoVPD Learning Collective Initiative”.

This is a messaging platform for you to:

- Receive **notification** of the next sessions
- Receive updates on **tools and resources**
- **Share ideas** with each other



THANK YOU

For more information and technical support on any of the material presented, please contact.

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